

Doc Code:

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/811,589; I-SP 6,806,081
	Filing Date	03/20/01; Issued: 10/19/04
	First Named Inventor	John SHANNON
	Art Unit	1632
	Examiner Name	Shin Lin Chea
	Attorney Docket Number	895.00102

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: **65746**
☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:
65746

OR

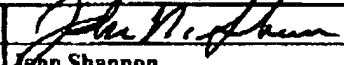
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	John Shannon		
Date	12-4-07	Telephone	931-796-1157

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/811,509; USPT 6,806,081
Filing Date	03/20/01; Issued: 10/19/04
First Named Inventor	John SHANNON
Art Unit	1632
Examiner Name	Shin Lin Chen
Attorney Docket Number	895.00102

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OR

☒ I hereby appoint the practitioners associated with the Customer Number:

65746

☒ Please change the correspondence address for the above-identified application to:

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OR

☒ Firm or
Individual Name

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☒ Applicant/Inventor.

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Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

John R. Huffman

Date

Dec. 4, 2007

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701 834-2316

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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